

# **TRICARE Consumer Watch**

Latin America • Quarter 4 CY 2002

Latin America: Sample size - 411 Response rate - 17.8%

MHS: Sample size - 45,000 Response rate - 28.5%

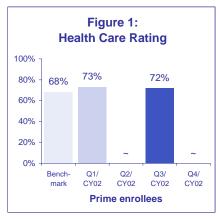
#### **Inside Consumer Watch**

TRICARE Consumer Watch is a brief summary of what TRICARE Prime enrollees in your region say about their healthcare. Data are taken from the Health Care Survey of DoD Beneficiaries (HCSDB)<sup>1</sup>. The HCSDB uses questions from the Consumer Assessment of Health Plans Survey (CAHPS)<sup>2</sup>, a survey designed to help consumers choose among health plans. Every quarter, a representative sample of TRICARE beneficiaries are asked about their care in the last 12 months and the results are adjusted for age and health status and reported in this publication. In addition, each quarter, Consumer Watch includes a special report on a different topic. The special report for this quarter focuses on Access to Care for Prime and Standard/Extra users.

Scores are compared with averages taken from the 2001 National CAHPS Benchmarking Database (NCBD)<sup>3</sup>, which contains results from surveys given to beneficiaries by civilian health plans.

### **Health Care**

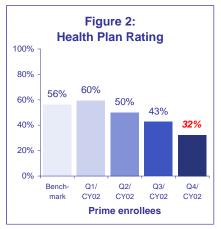
Prime enrollees were asked to rate their healthcare from 0 to 10, where 0 is worst and 10 is best. Figure 1 shows the percentage who rated their healthcare 8 or above in the survey fielded in the 4th quarter of 2002, describing the period October 2001 to September 2002, and each of the 3 previous quarters. Numbers in red italics are significantly different from the benchmark (p < .05).



#### **Health Plan**

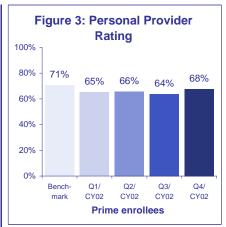
Prime enrollees were asked to rate their health plan from 0 to 10, where 0 is worst

and 10 is best. Figure 2 shows the percentage who rated their plan 8 or above for each reporting period.



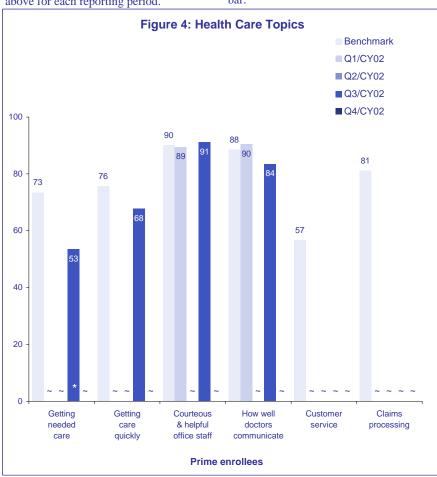
## **Personal Provider**

Prime enrollees who have a personal provider were asked to rate their personal provider from 0 to 10, where 0 is worst and 10 is best. Figure 3 shows the percentage who rated their doctor 8 or above for each reporting period.



## **Health Care Topics**

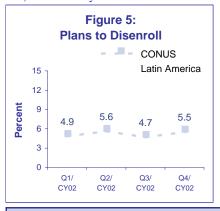
Health Care Topics scores average together the results of related questions. Each score represents the percentage who "usually" or "always" got the treatment they wanted or had "no problem" getting the desired level of service for each reporting period. Scores significantly different from the benchmark (p < .05) are shown by asterisks at the bottom of the bar.



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### **Plans to Disenroll**

Enrollees were asked whether they plan to disenroll from Prime. Figure 5 shows the percentage of retirees and family members of active duty or retirees who plan to disenroll. Regional values differing significantly from CONUS (p < .05) are shown by red italics.

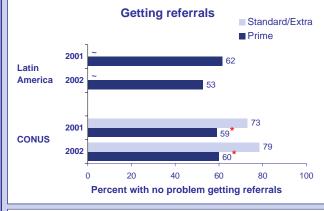


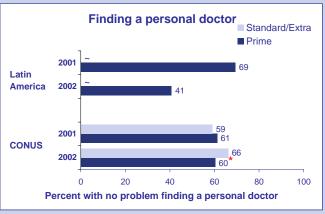
Preventive Care					
Type of Care	Qtr 1 CY 2002	Qtr 2 CY 2002	Qtr 3 CY 2002	Qtr 4 CY 2002	Healthy People 2010 Goal
Mammography	~	~	~	~	70
(women ≥ 40)				~	
Pap Smear	~	~	~	~	90
(women <u>&gt;</u> 18)				~	
Hypertension Screen	75	77	81	71	95
(adults)				(34)	
Prenatal Care	~	~	~	~	90
(in 1st trimester)				~	

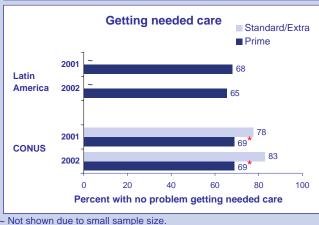
The Preventive Care table shows Prime enrollees' rates for the most recent four quarters of data for the following types of care: mammography for women age 40 and over; pap smear for women age 18 and over; hypertension screening for all adults; and prenatal care in the first trimester for women currently pregnant or pregnant in the past year. Rates significantly different (p < .05) from the Healthy People 2010 goal are shown by red italics.

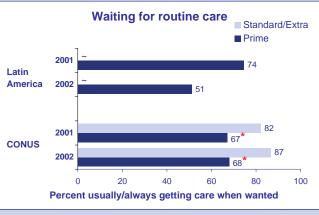
## Special Report: Access to Health Care for TRICARE Users

The graphs below show the access to care of beneficiaries who report using Prime or Standard/Extra for most of their health care. The graphs for getting referrals, getting needed care and waiting for routine care show that in both 2001 and 2002, Standard/Extra users in CONUS MHS reported fewer access problems than did Prime enrollees. In CONUS, Standard/Extra users also reported fewer problems finding a personal doctor than did Prime enrollees. In Latin America, differences in access for Prime and Standard/Extra were difficult to detect because few Standard/Extra users responded to the survey. Statistically significant (p < .05) differences are shown by an asterisk.









<sup>&</sup>lt;sup>1</sup> For more information on the HCSDB go to http://www.tricare.osd.mil/survey/hcsurvey

<sup>&</sup>lt;sup>2</sup> For more information on CAHPS go to http://www.ahcpr.gov/qual/

<sup>&</sup>lt;sup>3</sup> For more information on the NCBD go to http://ncbd.cahps.org/